

Event: _____

Date/Time of Function: _____

Contact Person: _____

Phone/Email: _____

Address _____

Type of Function _____ Expected Number of Guests _____

Time Meal Served: _____ Time Hors D'oeuvres Served: _____

Small Side Room (Approx 50 guest): **\$150** **Dining Room** (Approx 75 guests): **\$600**

Pavilion (Approx 150 guests): **\$250** **Small Side and Dining Room** (Approx 125 guests) **\$700**

Bar Service: ___ Cash ___ Open Bar Times: _____

Please note: food will be served at time stated – any changes must be made with the restaurant manager 24 hours prior to event. Above charges are for 4 hour time slot – each additional hour will be \$100. Signed contract and room rental _____ are required at time of reservation. Deposit will be determined by the cost of the room rental fee and will be transferred to cover the room rental cost on the day of the event, exclusion of weddings. Confirmed number of guests is required 14 days prior to event. (Customer will be charged for confirmed number of guests) – Final bill and any additional food or beverage charges incurred on the day of the event must be paid that day. Children's menu available to those 8 and under.

Extra food will not be allowed to be boxed up and taken home due to liability concerns.

We will try to accommodate our customers to the best of our ability, within reason. If you have special requests for food or liquor and it is not included on our choices, please ask and we will try to accommodate you; however, doing so may incur additional costs. Please inform us of any special dietary needs that must be met at the time of your confirmation. All food and beverages must be purchased on premises.

Thank you and we look forward to hosting your event at The Green Horizon Grill.

Room Rental: _____

Credit Card: _____ Expiration Date: _____

CVV: _____ Billing Zip Code: _____

Client Signature: _____

Manager Signature: _____